

MONTANA STATE PLAN & POLICY MANUAL
CHAPTER THREE

Policy Number 3.1

Affirmative Action Plan

Revised/Effective Date: October 1, 2012

Title: Affirmative Action Plan

Purpose

The Montana WIC Program has established an “Affirmative Action Plan” to be used if participation increases to the level that a waiting list and priorities need to be established.

Authority

7CFR 246.4(a) (5)

Policy

The Montana WIC Program will use the following guidelines to establish new WIC clinics or guide participation in the event that funding and caseload maintenance become an issue.

I. Background Information

- A. Montana has 27 regions consisting of 56 counties and 7 Native American Reservations. The Tribal WIC Programs on the reservations include portions of 11 counties and serve both on and off reservation Native Americans in their respective areas.
- B. The data used in this study are statistically reliable. The Records and Statistics Bureau of DPHHS reviewed the Affirmative Action Plan for appropriate statistical technique and analysis. Data presented included the 56 counties and 7 Native American Reservations.
- C. Figures for Indian Health Service Units, however, had to be extrapolated from the county figures (2000 census). Figures for Native Americans in Big Horn, Blaine, Flathead, Glacier, Hill, Lake, Missoula, Phillips, Pondera, and Roosevelt, Rosebud, Sanders and Valley counties were therefore pulled from the totals for those counties and used to establish data for the reservations.

II. Affirmative Action Plan

- A. The Affirmative Action Plan for the current fiscal year has been based on the most recently available census data (2000) and updated data on low birth weight infants from the Montana Department of Public Health and Human Services (DPHHS).
- B. Actual monthly caseload by priority reflects the month of April in the current calendar year. For the number of eligible participants for each regional WIC service area see Attachment [Affirmative Action Plan](#).

III. Description of Ranking System

- A. To establish the ranking, the following criteria were used:
 - 1. Incidence of low birth weight infants (1996 - 2001). Data was based on the statistical report done by the Bureau of Records and Statistics, Department of Public Health and Human Services (DPHHS). The data in the statistical report is broken down by county, and within county, by race (white, Indian, and other).

2. Percentage of population (women, children under age 5) at 185% of poverty or less (2000 census). Population at 185% of poverty or less was determined from income and poverty status data based on 2000 Bureau of Census statistics for General Social and Economic Characteristics. Income for women and children under 5 at or below 185% of poverty is used as an indicator for evaluating financial eligibility throughout Montana.
3. Minority populations (2000 census). Information on minority populations was taken from 2000 census reports.

IV. Affirmative Action Plan Ranking

- A. The Affirmative Action Plan rankings would be used as one tool among many to assist in the expansion of WIC in Montana, when and if funds become available. If funds were available, new agencies or satellites would be opened in descending order from the top in the Plan, with no WIC agency receiving funds until the eligible agencies above were funded.
- B. The number of potentially eligible persons was obtained by utilizing census data for children below 185% poverty and number of total births. This data was inserted into the following formula, as suggested by State Plan Guidance:

(Total births x 1.25) x % children below 185% + # children below 185% = potentially eligible population.)

V. Priorities Served

- A. The Montana WIC Program serves Priorities I-VI.

VI. CSFP Programs

- A. The Commodity Supplemental Food Program (CSFP) works with the WIC Program to ensure no dual benefits are issued to participants.